2,31929
THE
COMMISSION
AROLINA

(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA TRANSPORTATION COVER SHEET DOCKET NUMBER: 2// - // - // If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned	
(Please type or print) Submitted by: Kenneth E. LeBel / Constal Transport Address: 2222 Ashley River Rd. Apt. 7-H Charleston, S.C. 29414) and should be entered above. (hy Telephone: 803-38/-6666 Fax: 803-732-285/	
Charleston, G.C. 29414	Other: Email: <u>alucard 6956@16tmAil.com</u>	
as required by law. This form is required for use by the Public Service be filled out completely.	aces nor supplements the filing and service of pleadings or other papers e Commission of South Carolina for the purpose of docketing and must	
NATURE OF ACTIO	N (Check all that apply)	
Application - Class A/A Restricted	Request for Name Change on Certificate	
Application - Class C Taxi	Request to Amend Scope of Authority	
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)	
Application - Class C Charter Bus	Request to Amend Passenger Limit	
Application - Class C Non-Emergency	Request	
Application - Class C Stretcher Van	Exhibit	
Application - Class E Household Goods	Late-Filed Exhibit	
Application - Class E Hazardous Waste	Letter	
Application	Proposed Order	
Request for Extension to Comply with Order	Publisher's Affidavit	
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Response Response	
Request for Cancellation of Certificate	Return to Petition FEB 1 8 2010	
Request for Suspension	Other:	
Request for Reinstatement	CLERK'S OFFICE	

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date: 2-3-10
CLA	ASS C - CHARTER
Appl of S.	lication is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.
1. Na	ame under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)
	Kenneth E. LeBel / DBA COASTAl Transportation
	Kenneth E. LeBel DBA Coastal Transportation 2222 Ashley River Rd. Apt. 7-H Charleston, 4.C. 29414 Street Address of Applicant
<u></u>	Mailing Address of Applicant if different from street address
	803-381-6666 803-732-2851 Phone Fax
	
	alucard 6956@ hotmail. com Email Address
	Email Address
	f incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)
3. \$	Select Entity Type: (Check one)
-	☑ Individual Owner/Sole Proprietorship
	Partnership - List names and address of all person having an interest in the business.
ļ	Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance	at Time Applica	ation is Filed:	
Month	FEb.	Year <u>20/0</u>	

Assets:

Cash	1000.00
Receivables	
Real Estate	12,000.00
Buildings and Equipment (Net)	
Motor Vehicles (Net)	6000.00
Garage Equipment (Net)	
Machinery and Tools (Net)	1,200.00
Supplies on Hand	
Prepaids and Other Assets	15,000.00
Total Assets	37,000.00
Liabilities and Equity:	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	380.00 mth
Other Liabilities	
Total Liabilities	380.00
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	

PROPOSED RATES AND CHARGES FOR SERVICE

aximum Proposed Rates and Charges for Service	are as follows:	
\$200.00 per hr.		
ass, per m.		
ounties to be Served:		
harlestan Po		
harleston Co. Porchester Co.		
orene of every		
	•	
ximum Number of Passengers per Vehicle:		

DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Lincoln	2000 Town CAR	1LNHM82W6YY923843	4075	5

INSURANCE QUOTE

This form MUST BE COMPLETED AND SIGNED by an AUTHORIZED INSURANCE COMPANY REPRESENTATIV
The following insurance quote is for:
Kenneth E. LeBel DBA Constal Transportation Name of Motor Carrier
Kenneth E. LeBel DBA Constal Transportation Name of Motor Carrier 2222 Ashley River Rd. Apt. 7-H Charleston, S.C. 29414 Address of Motor Carrier
Limits Onoted: (See Below) Liability Insurance \$ 1,233 \(\frac{1}{2}\) Limits \(\frac{1}{2}\) Limits \(\frac{1}{2}\) \(\frac{1}{2}\) Limits \(\frac{1}{2}\) \(\frac{1}2\) \(\frac{1}2\) \(\fr
The above quoted premium is for a term of months.
Minimum Limits - Intrastate Only:
1-7 Passengers \$ 25,000/50,000/25,000 8-15 Passengers \$ 25,000/100,000/25,000
Companion Prouty and Casualty Insurance
51 Clemson Rd, Columbia SC 29229 Home Office Address of Company
I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is anthorized by the South Carolina Department of Insurance to do business in South Carolina.
2/16/10 Authorized insurance Company Representative's Signature
The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of

current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

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Exhibit FWA

	Kenneth E, LeBel/DBA Constal Iransportation Name of Applicant
1. Are there current O Yes	ly any outstanding judgments against the Applicant? No
If Yes, indicate	nature of judgement(s) against applicant.
	iliar with all statutes and regulations, including safety regulations and governing for-hire motors in South South Carolina, and does Applicant agree to operate in compliance with these lations?
⊗ Yes	○ No
therewith?	re of the Commission's insurance requirements and the insurance premium costs associated
 	○ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

COUNTY OF CLARENDON	Kenneth E. Le Bel Applicant's Signature
	Applicant's Signature
I, Kenneth E. LeBel/Coasta/Transpe	orbation Owner
•	Title
of Kenneth E. LeBel	
Ар	plicant
the Applicant for the Certificate of Public Convenience a affirm that all statements contained in the above applicat	And Necessity as set forth in the foregoing, swear or ion are true and correct. **Example 1. **Example 2. **Example 3. **Example 3. **Example 4. **Example 3. **Example 4. **
_	Henneth & Sp. S.
SWORN TO BEFORE ME This day of FEBLUARY , 20/0 Notary Public	

TERRAL K. SCOTT MOTIVAY PLANIC CLASSIOCA COUNTY, S. C.

My Commission Expires Oct. 18, 2015